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## \*BIBDATASHEET\*

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## APPLICANTS

PAUL L. KORNBLITH, PITTSBURGH, PA;

*RG*  
 \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 08/679,056 07/12/1996 PAT 5,728,541

*RG*  
 \*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>RG</i> Initials				

ADDRESS  
 BARBARA E JOHNSON  
 WEBB ZIESENHEIM BRUENING LOGSDON  
 ORKIN & HANSON 700 KOPPERS BUILDING  
 436 SEVENTH AVENUE  
 PITTSBURGH, PA  
 152191818

TITLE  
 METHOD FOR CULTURING AND ASSAYING CELLS

FILING FEE  RECEIVED 489	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/>